Nelson County Employment Application

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. We are an equal opportunity employer.

Applicant Information								
Position Applied Fo	or					Date		
Last Name			Fire	st	L			M.I
Street Address							Apartment/U	 nit #
City			Sta	te			Zip	
City			Sta	ic			Zip	
Phone					E	E-Mail		
			X7 X7	Y.C.				TI C O
Are you a citizen of the United State? Yes No If no, are you authorized to work in the U.S.? Yes No					U.S.?			
Have you ever worked for this Yes No If so, When? organization?								
Have you ever been	convicted of a	felony?	Yes No					
L			Part-tim			Temporary		
On what date wo	ould you be a	vailabl	e for wor	·k?				
Can you travel it	f a job require	es it?	Yes		1	No		
Education								
Education								
High School				Address				
From	To Did you gradu			uate? Degre		Degree		
College Address								
From	To	ріа у	ou gradu	ate!		Degree		
Other			Address					
From	То	Did y	ou gradu	ate? Degree				

Employment Experience

Start with your present or most recent job. Include any job-related military service assignments. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Company		Phone	2()
Address		Superviso	or
Job Title	Starting Salary	7	Ending Salary
Responsibilities	<u> </u>		
From	То		
Reason For Leaving			
May we contact your previous supe	rvisor for a refer	rence? Y	es No
Company		Phone	2()
Address		Superviso	or
Job Title	Starting Salary	7	Ending Salary
Responsibilities			
From	То		
Reason For Leaving			
May we contact your previous supe	rvisor for a refer	rence? Y	es No
Company		Phone	e()
Address		Superviso	or
Job Title	Starting Salary	7	Ending Salary
Responsibilities			
From	То		
Reason For Leaving			
May we contact your previous supe	rvisor for a refer	rence?	Yes No

Military Service

Branch	From	То		
Rank at Discharge	Type of Discharge			
If other than honorable, explain				

Specialized Skills
Language Skills: Spoken Written
Trades/Maintenance Skills
Technical Skills
Use this space for any additional information you think would help us evaluate your application, including training, seminars, workshops, software programs, and specialized skills.
List professional, trade, business, volunteers experience or civic activities.

References	
Please list three professional references	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	·

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment a may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will " nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant Date